Effective October 1, 2001  On 749345								
7 25 05 CLAIMS AS FILED - PART ! (Column 1) (Column 2)				SMALL ENTITY OTHER THAN TYPE CO OR SMALL ENTITY				
TOTAL CLAIMS				RATE	FEE	1	RATE	FEE
FOR	NUMBER FILED NUMBER EXTRA		RA .	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS	-15 minus 20=	. 10		X\$ 9=		OR	X318=	15H .
INDEPENDENT CLAIMS	3 minus 1 =	3 "minus 5 = " Ø)		X42=	-		X84=	
MULTIPLE DEPENDENT CLAIM P	[	<b>5</b>		<del> </del>	OR		<u> </u>	
* If the difference in column/1/s jess than zero, enter "0" in column 2			2	+140=		OR	+280=	
1174) CLAIMS AS AMENDED - PART II					L	OR	TOTAL	
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY								
CLAIUS REHADIONG AFTER AMERICANIT	HIGH MUM PREVIO PAID	BER PRES		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Total . I L Independent . 3	Minus	<del>20</del> -	コ	X\$ 9=	FEE	OR	X\$18=	FEE
Independent . 3	Minus	31		X42•		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				1148		OR	+280=	
<i>j</i> 1			1	TOTAL		20	YOTAL	(0)
6/29/06 (Column 1) (Column 2) (Column 3)						Jun.	ADOIT. FEE	74
CALLS REMAINING AFTER AMENDMENT Total Independent Total	FAIGH MAAA PREVIC PAID	EST BER PRES DUSLY EXT	ENT .	RATE	ADDI- TIONAL FEE		RATE	ADDI/ TIONAL FEE
g Total 14	Minus to a	20		X\$ 9-		OR	X\$18=	
Independent • 3 FIRST PRESENTATION OF MI	Minus ***	3  -	<del>-</del> -	X42=		OR	X84-	
				+140=		OR	<b>1280</b> =	
W/17/06 (Column 1)	•	. •		YOTAL NOOTL FEE	-	OR	TOTAL	17
CAMS REMARKING AFTER AMENDMENT Total  Total  Independent  Total  Total  Total  Total  Total  Total  Total  Total  Total	RICH NUM PREVIO PAID	EST BER PRES XUSLY EXT	EMT [	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Protest - 14		20 - /		X3 9-	FEE	~	X\$18=	FEE
independent . 3	Minus see	3 -/		X42-		OR	X84=	
FIRST PRESENTATION OF MI		~~		OR	707°			
* If the entry in occurre t is less than the entry in occurre 2, write "I" in column 3.				+140=		OR	+280=	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."					]	OR	TOTAL LOCIT, FEE	

Application or Docket Number